Case 09-06288 Doc 1 Filed 02/26/09 Entered 02/26/09 15:42:11 Desc Main 2/26/09 3:39PM Document Page 1 of 56

United States Bankruptcy Court Northern District of Illinois							Voluntary	Petition		
Name of Debtor (if individual, enter Last, First, Bonuchi, Anthony A.	Name of Debtor (if individual, enter Last, First, Middle): Bonuchi, Anthony A.					Name of Joint Debtor (Spouse) (Last, First, Middle): Bonuchi, Laura N.				
All Other Names used by the Debtor in the last 8 (include married, maiden, and trade names):	All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): FKA Laura N Nitz									
Last four digits of Soc. Sec. or Individual-Taxpa (if more than one, state all) xxx-xx-4351	yer I.D. (ITIN) No./	/Complete EI	(if mor	our digits or than one, s	tate all)	Individual-T	Гахрауег I.D. (ITIN) N	o./Complete EIN		
Street Address of Debtor (No. and Street, City, and State): 520 S. Jefferson Street Lockport, IL ZIP Code					erson Stree		eet, City, and State):	ZIP Code		
County of Residence or of the Principal Place of Will		60441	Count Wi l	•	nce or of the F	Principal Pla	ace of Business:	60441		
Mailing Address of Debtor (if different from stre	Γ	ZIP Code	Mailir	g Address	of Joint Debto	r (if differer	nt from street address):	ZIP Code		
(if different from street address above):										
Type of Debtor (Form of Organization) (Check one box) ■ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. □ Corporation (includes LLC and LLP) □ Partnership □ Other (If debtor is not one of the above entities, check this box and state type of entity below.)	(Chec ☐ Health Care Bu ☐ Single Asset R in 11 U.S.C. § ☐ Railroad ☐ Stockbroker ☐ Commodity Bu ☐ Clearing Bank ☐ Other ☐ Tax-Exe	eal Estate as 101 (51B) roker empt Entity x, if applicable -exempt orga of the United) unization I States	defined "incurr	the Pe er 7 er 9 er 11 er 12	Checksumer debts, 101(8) as ual primarily	busin	Recognition eding		
Filing Fee (Check on Full Filing Fee attached Filing Fee to be paid in installments (applica attach signed application for the court's consis unable to pay fee except in installments. R Filing Fee waiver requested (applicable to chattach signed application for the court's consistant of the court's co	ible to individuals or ideration certifying tule 1006(b). See Offnapter 7 individuals ideration. See Official for distribution to uerty is excluded and	that the debto icial Form 3A. only). Must il Form 3B.	Check	Debtor is if: Debtor's a to insiders all applica A plan is Acceptanc classes of	a small busine not a small busing gregate nonce or affiliates) able boxes: being filed with tees of the plan	contingent li are less than th this petition were solicitic coordance w	defined in 11 U.S.C. § or as defined in 11 U.S. quidated debts (exclude \$2,190,000.	ing debts owed the or more b).		
1- 50- 100- 200-	on to unsecured cree 1,000- 5,001- 5,000 10,000		25,001- 50,000	50,001- 100,000	OVER 100,000					
\$0 to \$50,001 to \$100,001 to \$500,001 \$50,000 \$50,000 to \$1 million	\$1,000,001 \$10,000,001 to \$10 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion					
\$0 to \$50,001 to \$100,001 to \$500,001	\$1,000,001 \$10,000,001 to \$10		\$100,000,001 to \$500	\$500,000,001 to \$1 billion						

Case 09-06288 Doc 1 Filed 02/26/09 Entered 02/26/09 15:42:11 Desc Main 2/26/09 3:39PM

Document Page 2 of 56 B1 (Official Form 1)(1/08) Page 2 Name of Debtor(s): Voluntary Petition Bonuchi, Anthony A. Bonuchi, Laura N. (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Location Case Number: Date Filed: Where Filed: - None -Location Case Number: Date Filed: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X <u>/s/ John C. Renzi -</u> February 26, 2009 Signature of Attorney for Debtor(s) (Date) John C. Renzi - #03124627 Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ■ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Bonuchi, Anthony A. Bonuchi, Laura N.

Signatures Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code,

specified in this petition.

X /s/ Anthony A. Bonuchi

Signature of Debtor Anthony A. Bonuchi

X /s/ Laura N. Bonuchi

Signature of Joint Debtor Laura N. Bonuchi

Telephone Number (If not represented by attorney)

February 26, 2009

Date

Signature of Attorney*

X /s/ John C. Renzi -

Signature of Attorney for Debtor(s)

John C. Renzi - #03124627

Printed Name of Attorney for Debtor(s)

JUNE, PRODEHL & RENZI - #03124627

Firm Name

1861 Black Road Joliet, IL 60435

Address

(815) 725-8000 Fax: (815)725-6126

Telephone Number

February 26, 2009

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

7	v
2	١

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

	_	

Date

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

Case 09-06288 Doc 1 Filed 02/26/09 Entered 02/26/09 15:42:11 Desc Main Document Page 4 of 56

Official Form 1, Exhibit D (10/06)

United States Bankruntcy Court

		Northern District of Illinois		
In re	Anthony A. Bonuchi Laura N. Bonuchi		Case No.	
		Debtor(s)	Chapter	7

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.][Summarize exigent circumstances here.1

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

Case 09-06288 Doc 1 Filed 02/26/09 Entered 02/26/09 15:42:11 Desc Main Document Page 5 of 56

Official Form 1, Exh. D (10/06) - Cont.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable
statement.] [Must be accompanied by a motion for determination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or
mental deficiency so as to be incapable of realizing and making rational decisions with respect to
financial responsibilities.);
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being
unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or
through the Internet.);
☐ Active military duty in a military combat zone.

I certify under penalty of perjury that the information provided above is true and correct.

□ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling

Signature of Debtor:	/s/ Anthony A. Bonuchi	
	Anthony A. Bonuchi	

requirement of 11 U.S.C. § 109(h) does not apply in this district.

Date: **February 26, 2009**

Case 09-06288 Doc 1 Filed 02/26/09 Entered 02/26/09 15:42:11 Desc Main

Document Page 6 of 56

Official Form 1, Exhibit D (10/06)

United States Bankruptcy Court Northern District of Illinois

		Not thet if District of Illinois		
In re	Anthony A. Bonuchi Laura N. Bonuchi		Case No.	
		Debtor(s)	Chapter	7

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.][Summarize exigent circumstances here.1

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

Case 09-06288 Doc 1 Filed 02/26/09 Entered 02/26/09 15:42:11 Desc Main Document Page 7 of 56

Official Form 1, Exh. D (10/06) - Cont.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable
statement.] [Must be accompanied by a motion for determination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or
mental deficiency so as to be incapable of realizing and making rational decisions with respect to
financial responsibilities.);
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being
unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or
through the Internet.);
☐ Active military duty in a military combat zone.
□ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling

I certify under penalty of perjury that the information provided above is true and correct.

Signat	ure of Debtor:	/s/ Laura N. Bonuchi
		Laura N. Bonuchi
Date:	February 26, 2009	

requirement of 11 U.S.C. § 109(h) does not apply in this district.

Case 09-06288 Doc 1 Filed 02/26/09 Entered 02/26/09 15:42:11 Desc Main Document Page 8 of 56

B6 Summary (Official Form 6 - Summary) (12/07)

United States Bankruptcy Court Northern District of Illinois

In re	Anthony A. Bonuchi,		Case No	
	Laura N. Bonuchi			
		Debtors	Chapter	7
			•	

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	225,000.00		
B - Personal Property	Yes	4	34,545.00		
C - Property Claimed as Exempt	Yes	2			
D - Creditors Holding Secured Claims	Yes	2		237,505.98	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	12		543,147.53	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			2,279.36
J - Current Expenditures of Individual Debtor(s)	Yes	2			5,013.98
Total Number of Sheets of ALL Schedu	ıles	27			
	T	otal Assets	259,545.00		
			Total Liabilities	780,653.51	

Form 6 - Statistical Summary (12/07)

United States Bankruptcy Court Northern District of Illinois

In re	Anthony A. Bonuchi,		Case No.		
	Laura N. Bonuchi				
_		Debtors	Chapter	7	

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. \S 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	0.00

State the following:

Average Income (from Schedule I, Line 16)	2,279.36
Average Expenses (from Schedule J, Line 18)	5,013.98
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	4,981.97

State the following:

bute the following.		
Total from Schedule D, "UNSECURED PORTION, IF ANY" column		18,171.98
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		543,147.53
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		561,319.51

2/26/09 3:39PM

Case 09-06288 Doc 1 Filed 02/26/09 Entered 02/26/09 15:42:11 Desc Main Document Page 10 of 56

B6A (Official Form 6A) (12/07)

In re	Anthony A. Bonuchi,	Case No.
	Laura N. Ronuchi	

Debtors

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

single family residence located at 520 S. Jefferson Street. Lockport, IL 60441	fee simple	н	225,000.00	209,154.00
Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim

Sub-Total > 225,000.00 (Total of this page)

225,000.00

Total >

0 continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)

2/26/09 3:39PM

Case 09-06288 Doc 1 Filed 02/26/09 Entered 02/26/09 15:42:11 Desc Main Document Page 11 of 56

B6B (Official Form 6B) (12/07)

In

re	Anthony A. Bonuchi,	Case No
	Laura N. Bonuchi	

Debtors

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	Cash	J	40.00
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan,	Earth Movers Credit Union (savings)(p.l.)(Debtor) (multiple collateral)	Н	980.00
	thrift, building and loan, and homestead associations, or credit	Harris Bank (checking)(joint)	J	50.00
	unions, brokerage houses, or cooperatives.	Harris Bank (checking) (Co-Debtor)	W	15.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X		
4.	Household goods and furnishings, including audio, video, and computer equipment.	5 rooms of furniture and appliances averaging in excess of 9 eyars of age	J	525.00
5.	Books, pictures and other art objects, antiques, stamp, coin,	Misc. sports collection (jerseys)	J	1,850.00
	record, tape, compact disc, and other collections or collectibles.	Misc. CD & DVD	J	65.00
6.	Wearing apparel.	Necessary wearing apparel	J	275.00
7.	Furs and jewelry.	Wedding rings	J	550.00
8.	Firearms and sports, photographic, and other hobby equipment.	golf clubs	J	45.00
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	term life	J	0.00
10.	Annuities. Itemize and name each issuer.	TRS (vested and nonassailable)(Co-Debtor)	W	Unknown

Sub-Total > 4,395.00 (Total of this page)

³ continuation sheets attached to the Schedule of Personal Property

Case 09-06288 Doc 1 Filed 02/26/09 Entered 02/26/09 15:42:11 Desc Main Document Page 12 of 56

 $B6B\ (Official\ Form\ 6B)\ (12/07)$ - Cont.

In re Anthony A. Bonuchi, Laura N. Bonuchi

Case No.

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	х			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	est	tax refund 2008	J	4,500.00
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	wo Am	rk compensation proceeding (Lockport Fire and abulance District)	н	Unknown
			<i>(</i> 77)	Sub-Tota	al > 4,500.00
She	et 1 of 3 continuation sheets at		(Total	of this page)	

Sheet <u>1</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

 $B6B\ (Official\ Form\ 6B)\ (12/07)$ - Cont.

In re	Anthony A. Bonuchi
	Laura N. Bonuchi

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22. Patents, copyrights, and other intellectual property. Give particulars.	Х			
23. Licenses, franchises, and other general intangibles. Give particulars.	Х			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		008 Yamaha Y2450 with Debtor(f.l.) (multiple ollateral)	J	6,500.00
		006 Honda CRF250 R (with 3rd Party)(f.l.) (Multiple ollateral)	J	5,600.00
	19	994 Dodge Dart Sport (inoperable)	J	2,800.00
	20	006 Jetta (f.l)	J	9,200.00
26. Boats, motors, and accessories.	Х			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	pe	etigree pet (papers pending)	J	100.00
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			

Sheet <u>2</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

Case 09-06288 Doc 1 Filed 02/26/09 Entered 02/26/09 15:42:11 Desc Main Document Page 14 of 56

 $B6B\ (Official\ Form\ 6B)\ (12/07)$ - Cont.

In re Anthony A. Bonuchi, Case No. _______
Laura N. Bonuchi

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
35. Other personal property of any kind	tool box with tools (handtools)	J	1,200.00
not already listed. Itemize.	computer	J	250.00

| Sub-Total > 1,450.00 (Total of this page) | Total > 34,545.00 B6C (Official Form 6C) (12/07)

In re Anthony A. Bonuchi, Laura N. Bonuchi

se No					
	se No				

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:	☐ Check if debtor claims a homestead exemption that exceed
(Check one box)	\$136,875.

☐ 11 U.S.C. §522(b)(2) ☐ 11 U.S.C. §522(b)(3)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Real Property single family residence located at 520 S. Jefferson Street, Lockport, IL 60441	735 ILCS 5/12-901	30,000.00	225,000.00
Cash on Hand Cash	735 ILCS 5/12-1001(b)	40.00	40.00
Checking, Savings, or Other Financial Accounts, Harris Bank (checking)(joint)	Certificates of Deposit 735 ILCS 5/12-1001(b)	50.00	50.00
Harris Bank (checking) (Co-Debtor)	735 ILCS 5/12-1001(b)	15.00	15.00
Household Goods and Furnishings 5 rooms of furniture and appliances averaging in excess of 9 eyars of age	735 ILCS 5/12-1001(b)	525.00	525.00
Books, Pictures and Other Art Objects; Collectible Misc. sports collection (jerseys)	<u>es</u> 735 ILCS 5/12-1001(b)	1,850.00	1,850.00
Misc. CD & DVD	735 ILCS 5/12-1001(b)	65.00	65.00
Wearing Apparel Necessary wearing apparel	735 ILCS 5/12-1001(a)	275.00	275.00
<u>Furs and Jewelry</u> Wedding rings	735 ILCS 5/12-1001(b)	550.00	550.00
Firearms and Sports, Photographic and Other Hol golf clubs	bby Equipment 735 ILCS 5/12-1001(b)	45.00	45.00
Interests in Insurance Policies term life	735 ILCS 5/12-1001(f)	100%	0.00
Annuities TRS (vested and nonassailable)(Co-Debtor)	735 ILCS 5/12-704	100%	Unknown
Other Liquidated Debts Owing Debtor Including T est tax refund 2008	ax Refund 735 ILCS 5/12-1001(g)(1) 735 ILCS 5/12-1001(b)	1,000.00 3,350.00	4,500.00
Other Contingent and Unliquidated Claims of Ever work compensation proceeding (Lockport Fire and Ambulance District)	ry <u>Nature</u> 820 ILCS 305/21	100%	Unknown
Automobiles, Trucks, Trailers, and Other Vehicles 1994 Dodge Dart Sport (inoperable)	735 ILCS 5/12-1001(c)	4,800.00	2,800.00
Animals petigree pet (papers pending)	735 ILCS 5/12-1001(b)	100.00	100.00

¹ continuation sheets attached to Schedule of Property Claimed as Exempt

Case 09-06288 Doc 1 Filed 02/26/09 Entered 02/26/09 15:42:11 Desc Main Document Page 16 of 56

B6C (Official Form 6C) (12/07) -- Cont.

In re Anthony A. Bonuchi, Case No. _______
Laura N. Bonuchi

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

(Continuation Sheet)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Other Personal Property of Any Kind Not Alrestool box with tools (handtools)	1,200.00	1,200.00	
computer	735 ILCS 5/12-1001(b)	210.00	250.00

Total: 44,075.00 237,265.00

Case 09-06288 Doc 1 Filed 02/26/09 Entered 02/26/09 15:42:11 Desc Main Document Page 17 of 56

B6D (Official Form 6D) (12/07)

In re	Anthony A. Bonuchi,
	Laura N. Bonuchi

2/26/09 3:39PM

Debtors

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	J H	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	COZH - ZG H Z	UNLLQULDAT	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. 946173-005 Earth Mover Credit Union P.O. Box 2937 Aurora, IL 60507		н	Earth Movers Credit Union (savings)(p.l.)(Debtor) (multiple collateral)	T	T E D			
Account No. 946173-005 Earth Mover Credit Union		J	value \$ 980.00 p.m.s.i 2008 Yamaha Y2450 with Debtor(f.l.) (multiple collateral)				11,539.94	10,559.94
Account No. 946173-005 Earth Mover Credit Union			Value \$ 6,500.00 p.m.s.i 2006 Honda CRF250 R (with 3rd Party)(f.l.) (Multiple collateral)				0.00	0.00
Account No. 09 CH 708		J	Value \$ 5,600.00 mortgage and note				0.00	0.00
Indy Mac P.O. Box 78826 Phoenix, AZ 85062-8826		J	single family residence located at 520 S. Jefferson Street, Lockport, IL 60441					
			Value \$ 225,000.00				209,154.00	0.00
continuation sheets attached		•	•	ubt nis p		_	220,693.94	10,559.94

Case 09-06288 Doc 1 Filed 02/26/09 Entered 02/26/09 15:42:11 Desc Main Page 18 of 56 Document

 $B6D\ (Official\ Form\ 6D)\ (12/07)$ - Cont.

In re	Anthony A. Bonuchi, Laura N. Bonuchi		Case No	
-		Debtors		

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS (Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	A H	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGEN	UNLIQUIDA	SPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. Representing: Indy Mac			Codilis & Assoc., P.C. 15 W. 030 North Frontage Rd. Ste. 100 Burr Ridge, IL 60527] T	A T E D			
Account No. 843605328	t		p.m.s.i	$\frac{1}{1}$		Н		
VW Finance P.O. Box 17497 Baltimore, MD 21297-1497		J	2006 Jetta (f.I)					
			Value \$ 9,200.00				16,812.04	7,612.04
Account No.			Value C					
Account No.	╁		Value \$	+		Н		
			Value \$					
Account No.								
Sheet 1 of 1 continuation sheets atta	che	d t	Value \$	Sub	l tota	ıl	40.040.04	7.040.04
Schedule of Creditors Holding Secured Claim		a II	(Total of t	his	pag	ge)	16,812.04	7,612.04
			(Report on Summary of So		lule		237,505.98	18,171.98

Case 09-06288 Doc 1 Filed 02/26/09 Entered 02/26/09 15:42:11 Desc Main Document Page 19 of 56

B6E (Official Form 6E) (12/07)

In re	Anthony A. Bonuchi,	Case No
	Laura N. Bonuchi	
-		Debtors ,

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not ent priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts repototal also on the Statistical Summary of Certain Liabilities and Related Data.	
■ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.	
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)	
☐ Domestic support obligations	
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).	relativ
☐ Extensions of credit in an involuntary case	
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment trustee or the order for relief. 11 U.S.C. § 507(a)(3).	ent of a
☐ Wages, salaries, and commissions	
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whiche occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).	
☐ Contributions to employee benefit plans	
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of b whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).	usiness
☐ Certain farmers and fishermen	
Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).	
☐ Deposits by individuals	
Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were negligible delivered or provided. 11 U.S.C. § 507(a)(7).	ot
☐ Taxes and certain other debts owed to governmental units	
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).	
☐ Commitments to maintain the capital of an insured depository institution	
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the FR Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).	⁷ ederal
☐ Claims for death or personal injury while debtor was intoxicated	
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).	:

^{*} Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Case 09-06288 Doc 1 Filed 02/26/09 Entered 02/26/09 15:42:11 Desc Main Document Page 20 of 56

B6F (Official Form 6F) (12/07)

In re	Anthony A. Bonuchi, Laura N. Bonuchi		Case No.	
_		Debtors	,	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

Check this box is debtor has no creditors nothing unsecutor	ou c		is to report on this benedule 1.					
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H W J C		NT L NG	Z Q	D I SPUTED		AMOUNT OF CLAIM
Account No.			Medical	Ť	IEI			
Allied Anesthesia Associates 185 Penny Avenue Dundee, IL 60118		J			D			Unknown
Account No. 22813			Medical		П	T	1	
Associated Anesthesiologists 301 N. Madison St. #306 Joliet, IL 60435		Н						1,200.00
Account No.			Medical		Н	H	+	
Associated Radiologists of Joliet 1200 Maple Road Suite 3309 Joliet, IL 60432		н						
					Ш	L		Unknown
Account No. BONUCH0000 Athletic & Therapeuric Institute P.O. Box 95139 Palatine, IL 60095-0139		н	Medical					1,922.63
			S (Total of t	Subt)	3,122.63

2/26/09 3:39PM

Case 09-06288 Doc 1 Filed 02/26/09 Entered 02/26/09 15:42:11 Desc Main Page 21 of 56 Document

B6F (Official Form 6F) (12/07) - Cont.

In re	Anthony A. Bonuchi,	Case No.
	Laura N. Bonuchi	

CREDITOR'S NAME,	Ç	Hu	sband, Wife, Joint, or Community	Ç	U	ļ		
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	O D E B T O R	C A M	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	I Q			AMOUNT OF CLAIM
Account No. BONUCH0000			Medical	'	E			
ATI Physical Therapy 806 Laraway Road New Lenox, IL 60451		н			В			4,482.23
Account No. 001975			Consumer	Τ	T	T	1	
Back in Balance 355 N. La Grange Road La Grange Park, IL 60526-5622		w						56.20
Account No. 5490-3537-3150-2158			Consumer	Т	T			
Bank of America P.O. Box 15726 Wilmington, DE 19886		н						3,249.72
Account No. 4888-6031-2161-2451			Consumer	T	T	T	1	
Bank of America P.O. Box 15019 Wilmington, DE 19886-5019		Н						149.16
Account No. 06249IL0012870 & 05083IL009370	T		Medical	\dagger	\top	t	†	
Blue Cross Blue Shield 2329 S. MacArthur Blvd Springfield, IL 62704-4503		н						39,105.75
Sheet no1 of _11_ sheets attached to Schedule of			,	Sub	tota	ıl	\top	47.042.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	this	pag	œ)	١	47,043.06

Case 09-06288 Doc 1 Filed 02/26/09 Entered 02/26/09 15:42:11 Desc Main Document Page 22 of 56

B6F (Official Form 6F) (12/07) - Cont.

In re	Anthony A. Bonuchi,	Case No.
	Laura N. Bonuchi	

				—			
CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	C	U	P	
MAILING ADDRESS	CODEBTOR	Н	DATE CLAIM WAS INCURRED AND	CONT	Į į	D I S P	
INCLUDING ZIP CODE,	B	W	CONSIDERATION FOR CLAIM. IF CLAIM	11	Q	Ų	
AND ACCOUNT NUMBER (See instructions above.)	0	C	IS SUBJECT TO SETOFF, SO STATE.	G	1	E	AMOUNT OF CLAIM
·	R	Ľ		N G E N	D A T	P	
Account No. 5178-0572-9364-1176			Consumer	T	T E D		
				\vdash	۳	┝	_
Capital One Bank		١					
P.O. Box 6492		W					
Carol Stream, IL 60197-6492							
							9,151.40
Account No. 09 AR 144	╁		Consumer	\vdash	┢		1
Chase Card Member Services		١					
P.O. Box 15153		Н					
Wilmington, DE 19886-5153							
							40.050.50
				L	L		13,053.58
Account No.			Michael D. Fine				
Banyacanting.			131 South Dearborn Street, Floor 5				
Representing:			Chicago, IL 60603				
Chase Card Member Services							
				L	L		
Account No. 5424-1806-8231-9931			Consumer				
Ott David							
Citi Bank		w					
P.O. Box 6000		**					
The Lakes, NV 89163							
							0.660.03
				$oldsymbol{\perp}$	L	L	8,669.83
Account No. 5424-1804-6346-0284			Consumer				
						1	
Citi Cards		 			1	1	
P.O. Box 6000		Н			1	1	
The Lakes, NV 89163						1	
						1	
				L	L		14,300.93
Sheet no. 2 of 11 sheets attached to Schedule of				Subt	tota	ıl	45 475 74
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	45,175.74

Case 09-06288 Doc 1 Filed 02/26/09 Entered 02/26/09 15:42:11 Desc Main Page 23 of 56 Document

B6F (Official Form 6F) (12/07) - Cont.

In re	Anthony A. Bonuchi,	Case No.
	Laura N. Bonuchi	

CREDITOR'S NAME,	CODEBTOR	Hu	sband, Wife, Joint, or Community	CO	UZL-	D	
MAILING ADDRESS	D E	H W	DATE CLAIM WAS INCURRED AND	N T	L	S P	
INCLUDING ZIP CODE, AND ACCOUNT NUMBER	ВТ	J ^{vv}	CONSIDERATION FOR CLAIM. IF CLAIM	11	Q U	Ų	AMOUNT OF CLAIM
(See instructions above.)	O R	С	IS SUBJECT TO SETOFF, SO STATE.	NGENH	11	ΙF	
Account No.	T		Blatt, Hasenmiller, Leibseker & Moo	T	.DATED		
Representing:	1		125 S. Wacker Dr.		D		_
Citi Cards			Ste. 400				
			Chicago, IL 60606				
Account No. 005517			Medical				ļ
Community Chironrootic Contor							
Community Chiropractic Center 101 Hempstead Place		н					
Joliet, IL 60433							
							2,615.00
Account No. 6011-0077-6022-7347			Consumer		$\overline{}$		
	l						
Discover							
P.O. Box 6103		W					
Carol Stream, IL 60197-6492							
							0.050.00
							2,658.89
Account No. 1475200	l		Medical				
Dr. George E. Dephillips							
2000 Glenwood Avenue		н					
Joliet, IL 60435							
							87,440.15
Account No. 4056	T	T	Medical	П	Г	Г	
	1						
Dr. Michael H. Malek		l <u>.</u> .					
555 West Court Street, Suite 412		Н					
Kankakee, IL 60901							
							74.040.00
							74,016.00
Sheet no. 3 of 11 sheets attached to Schedule of				Subt			166,730.04
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his 1	pag	e)	100,730.04

Case 09-06288 Doc 1 Filed 02/26/09 Entered 02/26/09 15:42:11 Desc Main Document Page 24 of 56

B6F (Official Form 6F) (12/07) - Cont.

In re	Anthony A. Bonuchi,	Case No.
	Laura N. Bonuchi	

CREDITOR'S NAME, MAIL INCA DADRISS INCTLIDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) Account No. 003-15988 DuPage Emergency Physical Care Center P.O. Box 88687 Chicago, IL 60680-1667 Account No. 11.60 Account No. Loout46811 Edward Health Ventures Inden Oaks Medical Group 915 S. Washington Street Naperville, IL 60540 Account No. Loout46811 Edward Hospital 3471 Eagle Way Carol Stream, IL 60197-4102 EM Strategies Armor Systems Corporation 1700 Kiefer Drive, Suite 1 Zion, IL 60099-5105 Medical EMSTrategies Armor Systems Corporation 1700 Kiefer Drive, Suite 1 Zion, IL 60099-5105 Medical Medical						_		
AND ACCOUNT NUMBER (See instructions above.) Account No. 003-15988 DuPage Emergency Physical Care Center P.O. Box 88667 Chicago, IL 60680-1667 Account No. Edward Health Ventures Linden Oaks Medical Group 801 S. Washington Street Naperville, IL 60540 Medical	CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	C	U	P	
AND ACCOUNT NUMBER (See instructions above.) Account No. 003-15988 DuPage Emergency Physical Care Center P.O. Box 88667 Chicago, IL 60680-1667 Account No. Edward Health Ventures Linden Oaks Medical Group 801 S. Washington Street Naperville, IL 60540 Medical		D		DATE CLAIM WAS INCURRED AND	N	Ļ	S	
Account No. 003-15988		B			1	Q	Ų	
Account No. 003-15988		Ö		IS SUBJECT TO SETOFF, SO STATE.	Ğ		E	AMOUNT OF CLAIM
DuPage Emergency Physical Care Center P.O. Box 88667 Chicago, IL 60680-1667 Medical H	, ,	I R				A	٦	
DuPage Emergency Physical Care Center P.O. Box 88667 Chicago, IL 60680-1667 Medical Edward Health Ventures Linden Oaks Medical Group 801 S. Washington Street Naperville, IL 60540 H Medical Edward Hospital 3471 Eagle Way Carol Stream, IL 60197-4102 Medical EM Strategies Armor Systems Corporation 1700 Kiefer Drive, Suite 1 270n, IL 60099-5105 Medical Subtoal Subtoal	Account No. 003-15988	1		Medical	'	Ę		
Care Center	DuDona Emananau Physical							-
P.O. Box 88667 Chicago, IL 60680-1667 Account No. Edward Health Ventures Linden Oaks Medical Group 801 S. Washington Street Naperville, IL 60540 Unknown Account No. L000146811 Edward Hospital 3471 Eagle Way Carol Stream, IL 60197-4102 EM Strategies Armor Systems Corporation 1700 Kiefer Drive, Suite 1 Zion, IL 60099-5105 Account No. 115862EMR ENT Surgical Consultants 2201 Glenwood Avenue Joliet, IL 60435 Sheet no. 4_ of _11_ sheets attached to Schedule of Subtotal 11.60 Medical Medical W			\ _w					
Chicago, IL 60680-1667			١,,					
Medical H								
Account No. Edward Health Ventures	Chicago, in 60660-1667							44.00
Edward Health Ventures Linden Oaks Medical Group 801 S. Washington Street Naperville, IL 60540 H					\perp			11.60
H H Unknown H Unknown H Unknown Unknown Unknown Account No. L000146811 H H H Unknown Edward Hospital 3471 Eagle Way Carol Stream, IL 60197-4102 H H 50.00 Account No. EMS. 22945356 & 002275330 H H H H H H H H H	Account No.			Medical				
H H Unknown H Unknown Unknown Unknown Account No. L000146811 H H H Unknown Account No. Edward Hospital A471 Eagle Way Carol Stream, IL 60197-4102 H H	Edward Haalth Wantons							
801 S. Washington Street Naperville, IL 60540 Unknown Account No. L000146811 Edward Hospital 3471 Eagle Way Carol Stream, IL 60197-4102 EM Strategies Armor Systems Corporation 1700 Kiefer Drive, Suite 1 Zion, IL 60099-5105 Medical H Medical Medical Medical FM Strategies Armor Systems Corporation 1700 Kiefer Drive, Suite 1 Zion, IL 60099-5105 Medical Medical FNT Surgical Consultants 2201 Glenwood Avenue Joliet, IL 60435 Sheet no. 4 of 11 sheets attached to Schedule of Subtotal			L					
Naperville, IL 60540			l''					
Medical H								
Account No. L000146811 Edward Hospital 3471 Eagle Way Carol Stream, IL 60197-4102 Account No. EMS. 22945356 & 002275330 EM Strategies Armor Systems Corporation 1700 Kiefer Drive, Suite 1 Zion, IL 60099-5105 H Medical H Account No. 115862EMR ENT Surgical Consultants 2201 Glenwood Avenue Joliet, IL 60435 Sheet no. 4 of 11 sheets attached to Schedule of Subtotal	Naperville, IL 60540							11-1
Edward Hospital 3471 Eagle Way Carol Stream, IL 60197-4102 Account No. EMS. 22945356 & 002275330 EM Strategies Armor Systems Corporation 1700 Kiefer Drive, Suite 1 Zion, IL 60099-5105 H Medical H Account No. 115862EMR ENT Surgical Consultants 2201 Glenwood Avenue Joliet, IL 60435 Medical 93.50 Sheet no. 4 of 11 sheets attached to Schedule of								Unknown
3471 Eagle Way Carol Stream, IL 60197-4102 Account No. EMS. 22945356 & 002275330 EM Strategies Armor Systems Corporation 1700 Kiefer Drive, Suite 1 Zion, IL 60099-5105 H Account No. 115862EMR ENT Surgical Consultants 2201 Glenwood Avenue Joliet, IL 60435 Medical W W Sheet no. 4_ of _11_ sheets attached to Schedule of Subtotal	Account No. L000146811			Medical				
3471 Eagle Way Carol Stream, IL 60197-4102 Account No. EMS. 22945356 & 002275330 EM Strategies Armor Systems Corporation 1700 Kiefer Drive, Suite 1 Zion, IL 60099-5105 H Account No. 115862EMR ENT Surgical Consultants 2201 Glenwood Avenue Joliet, IL 60435 Medical W W Sheet no. 4_ of _11_ sheets attached to Schedule of Subtotal		1						
Carol Stream, IL 60197-4102 Account No. EMS. 22945356 & 002275330 EM Strategies Armor Systems Corporation 1700 Kiefer Drive, Suite 1 Zion, IL 60099-5105 Account No. 115862EMR ENT Surgical Consultants 2201 Glenwood Avenue Joliet, IL 60435 Sheet no. 4_ of 11_ sheets attached to Schedule of			l					
Account No. EMS. 22945356 & 002275330 EM Strategies Armor Systems Corporation 1700 Kiefer Drive, Suite 1 Zion, IL 60099-5105 Account No. 115862EMR ENT Surgical Consultants 2201 Glenwood Avenue Joliet, IL 60435 Medical W Medical 93.50 Sheet no. 4 of 11 sheets attached to Schedule of			Н					
Account No. EMS. 22945356 & 002275330 EM Strategies Armor Systems Corporation 1700 Kiefer Drive, Suite 1 Zion, IL 60099-5105 Account No. 115862EMR ENT Surgical Consultants 2201 Glenwood Avenue Joliet, IL 60435 Sheet no. 4 of 11 sheets attached to Schedule of Subtotal	Carol Stream, IL 60197-4102							
Account No. EMS. 22945356 & 002275330 EM Strategies Armor Systems Corporation 1700 Kiefer Drive, Suite 1 Zion, IL 60099-5105 Account No. 115862EMR ENT Surgical Consultants 2201 Glenwood Avenue Joliet, IL 60435 Sheet no. 4 of 11 sheets attached to Schedule of Subtotal								
EM Strategies Armor Systems Corporation 1700 Kiefer Drive, Suite 1 Zion, IL 60099-5105 Account No. 115862EMR ENT Surgical Consultants 2201 Glenwood Avenue Joliet, IL 60435 Sheet no. 4 of 11 sheets attached to Schedule of Subtotal								50.00
Armor Systems Corporation 1700 Kiefer Drive, Suite 1 Zion, IL 60099-5105 Account No. 115862EMR ENT Surgical Consultants 2201 Glenwood Avenue Joliet, IL 60435 Sheet no. 4 of 11 sheets attached to Schedule of Subtotal	Account No. EMS. 22945356 & 002275330			Medical				
Armor Systems Corporation 1700 Kiefer Drive, Suite 1 Zion, IL 60099-5105 Account No. 115862EMR ENT Surgical Consultants 2201 Glenwood Avenue Joliet, IL 60435 Sheet no. 4 of 11 sheets attached to Schedule of Subtotal		1						
1700 Kiefer Drive, Suite 1 Zion, IL 60099-5105 Account No. 115862EMR ENT Surgical Consultants 2201 Glenwood Avenue Joliet, IL 60435 Sheet no4 of _11 sheets attached to Schedule of Subtotal			١					
Zion, IL 60099-5105			Н					
Account No. 115862EMR ENT Surgical Consultants 2201 Glenwood Avenue Joliet, IL 60435 Sheet no. 4 of 11 sheets attached to Schedule of								
Account No. 115862EMR ENT Surgical Consultants 2201 Glenwood Avenue Joliet, IL 60435 Sheet no. 4 of 11 sheets attached to Schedule of	Zion, IL 60099-5105							
ENT Surgical Consultants 2201 Glenwood Avenue Joliet, IL 60435 Sheet no. 4 of 11 sheets attached to Schedule of Subtotal								67.40
2201 Glenwood Avenue Joliet, IL 60435 Sheet no. 4 of 11 sheets attached to Schedule of Subtotal	Account No. 115862EMR			Medical	П			
2201 Glenwood Avenue Joliet, IL 60435 Sheet no. 4 of 11 sheets attached to Schedule of Subtotal		1						
2201 Glenwood Avenue Joliet, IL 60435 Sheet no. 4 of 11 sheets attached to Schedule of Subtotal	ENT Surgical Consultants	1						
Sheet no. 4 of 11 sheets attached to Schedule of Subtotal			W					
Sheet no. 4 of 11 sheets attached to Schedule of Subtotal	Joliet, IL 60435							
Sheet no. 4 of 11 sheets attached to Schedule of Subtotal								
1 222 50								93.50
1 222 50	Sheet no4 of _11 sheets attached to Schedule of	_	-	5	Subt	ota	1	
								222.50

Case 09-06288 Doc 1 Filed 02/26/09 Entered 02/26/09 15:42:11 Desc Main Page 25 of 56 Document

B6F (Official Form 6F) (12/07) - Cont.

In re	Anthony A. Bonuchi,	Case No.
	Laura N. Bonuchi	

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) Account No.	CODEBTOR	Hu H W	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	COZH_ZGWZH	QU L DAT	U E D	AMOUNT OF CLAIM
recount ito.	1				E D		
ER Physicians c/o Medical Managment Services 4100 Embassy Drive, Suite 200 Grand Rapids, MI 49546		н					Unknown
Account No. 099324			Medical		П	Г	
Future Diagnostics Group 254 Republic Avenue Joliet, IL 60435		н					17,327.00
	-			╨		Ļ	17,327.00
Account No. 5466-4100-1295-1817 GM Card P.O. Box 37281 Baltimore, MD 21297-3281		н	Consumer				11,502.00
Account No. 6319360			Medical		Г	Г	
Hinsdale Hospital 835 Treasury Center Chicago, IL 60694-3800		н					18,484.11
Account No. QY4651	1	T	Consumer	\forall	Г	T	
HSBC Bank 5300 S. 6th Street Springfield, IL 62703-5184		н					11,847.88
Sheet no5 of _11_ sheets attached to Schedule of				Subt			59,160.99
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his 1	pag	ge)	39,100.99

Case 09-06288 Doc 1 Filed 02/26/09 Entered 02/26/09 15:42:11 Desc Main Document Page 26 of 56

B6F (Official Form 6F) (12/07) - Cont.

In re	Anthony A. Bonuchi,	Case No.
	Laura N. Bonuchi	

					—	_	
CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	C	U	P	
MAILING ADDRESS	CODEBTOR	Н	DATE CLAIM WAS INCUIDED AND	CONT	UZLI	S	
INCLUDING ZIP CODE,	В	W	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	1	Q U	Ü	
AND ACCOUNT NUMBER	T	C	IS SUBJECT TO SETOFF, SO STATE.	N G	۱U	E	AMOUNT OF CLAIM
(See instructions above.)	Ř			NGEN	l D	ō	
Account No. BONUCH0000			Medical	Ť	A T E D		
	1				D		_
Industrial Pharmacy Management					İ		
20377 SW Acacia Street		Н					
Newport Beach, CA 92660							
					İ		180.04
A 000V20042704 8 000V20005000	╀	\vdash	Madiaal	₩	\vdash	L	10000
Account No. 060X29843704 & 060X29895966	4		Medical				
Inliet Dedictories Comise Com					İ		
Joliet Radiological Service Corp.		Н					
333 Madison Street		ľ					
Joliet, IL 60435							
							39.60
Account No. 208*430127.1	1	T	Medical	T			
	1				İ		
Laboratory & Pathology Diagnostocs					İ		
Department 4387		н					
Carol Stream, IL 60122-4387							
Caron on earn, 12 00 122-4307					İ		
					İ		27.00
	┸			$oldsymbol{\perp}$	L		27.00
Account No.			Medical				
					İ		
Loyola University Medical Center		١					
16621 107th Street		Н					
Orland Park, IL 60467					İ		
					İ		!
							Unknown
Account No. 1692001	t	\vdash	Medical	+	H	H	
1200001	1						
Loyola University Physician					l		
Two Westbrook Corporate Center	1	Н			l		
Suite 600	1	[]			l		
Westchester, IL 60154	1				ĺ		
vvestoriester, il 00104					l		
				\perp		L	Unknown
Sheet no. 6 of 11 sheets attached to Schedule of				Subt	ota	1	
Creditors Holding Unsecured Nonpriority Claims			(Total of t				246.64
2			(٠,		. ,	

Case 09-06288 Doc 1 Filed 02/26/09 Entered 02/26/09 15:42:11 Desc Main Document Page 27 of 56

B6F (Official Form 6F) (12/07) - Cont.

In re	Anthony A. Bonuchi,	Case No
	Laura N. Bonuchi	

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	C	U	D	
MAILING ADDRESS	CODEBTO	н	DATE OF A BANKA O DICHIDDED AND	CONT	UZLLQUL	s	
INCLUDING ZIP CODE,	B	W	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	1 1	Q	Ü	
AND ACCOUNT NUMBER	T	J	IS SUBJECT TO SETOFF, SO STATE.	N	U	Ī	AMOUNT OF CLAIM
(See instructions above.)	R	С	is sobsect to seron, so sinte.	NGEN	Ď	Ď	
Account No.			Medical	Τ̈́	DATED		
	1				D		
Midwest Sports & Pain							
1280 Wingham Pkwy		Н					
Romeoville, IL 60446							
,							
							Unknown
Account No. 2726657995			Student loans	\vdash			
	ł						
National Education							
200 W. Monroe Street		w					
Suite 700							
Chicago, IL 60606-5075							
							7,246.89
Account No.			Medical				
The count is a	ł		modioui				
Orthofix							
273 Azalea Road		н					
Mobile, AL 36609							
INOBIIC, AL 00000							
							Unknown
							Unknown
Account No. BONLAU0001			Medical				
Pain & Spine Institute		١					
2400 Glenwood Avenue, Suite 210		Н					
Joliet, IL 60435							
							5,100.00
Account No. 1874			Medical				
	1						
Pain Centers of Chicago, LLC							
301 Madison Street, room 305		Н					
Joliet, IL 60435							
							871.50
Sheet no. 7 of 11 sheets attached to Schedule of				ubt	Ota	<u>—</u> 1	
Creditors Holding Unsecured Nonpriority Claims			(Total of t				13,218.39
Creations moraling Onsecured Nonpriority Claims			(10tal of t	ms]	pag	(0)	

Case 09-06288 Doc 1 Filed 02/26/09 Entered 02/26/09 15:42:11 Desc Main Document Page 28 of 56

B6F (Official Form 6F) (12/07) - Cont.

In re	Anthony A. Bonuchi,	Case No.
	Laura N. Bonuchi	

	_			_			
CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	S	U	D I S	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	C 1 M H		CONFLEGEN	QU L D	SPUTED	AMOUNT OF CLAIM
Account No.			Medical	Ť	A T E D		
Pathology Consultants c/o McKesson, PIA 393 Lawyer Reques 4400 Garfield Road Clinton Township, MI 48038		н			D		Unknown
Account No. BONTO 000 2366 & 1681 & 000			Medical		Г		
Plainfield Medical Center Dr. Mohin T. Samaraweera, M.D. 24016 W. Main Street Plainfield, IL 60586		н					785.00
Account No. 05 WC 21063	-	-	Medical	\perp	╀	┞	700.00
Prairie Emergency Physicians P.O. Box 189015 Fort Lauderdale, FL 33318-9015		н					336.00
Account No. DC0016877205			Medical		T		
Provena Health 2870 Stoner Court, Suite 300 North Liberty, IA 52317		w					62.30
Account No. DC0025978154 & DC0025990147		T	DC0026236276, DC0026257788		T	T	
Provena St. Joseph's Medical Center 333 N. Madison Joliet, IL 60435		н	Medical				12,127.45
Sheet no8 of _11_ sheets attached to Schedule of				Sub			13,310.75
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)) [10,010.73

Case 09-06288 Doc 1 Filed 02/26/09 Entered 02/26/09 15:42:11 Desc Main Page 29 of 56 Document

B6F (Official Form 6F) (12/07) - Cont.

In re	Anthony A. Bonuchi,	Case No
	Laura N. Bonuchi	

							_	
CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	C	U	P)	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONFLEGEN	QULD	ΙD	J []	AMOUNT OF CLAIM
Account No. DC0026109053 & DC0026371597			DC0026391486 & DC0026420672	T	A T E D		Γ	
Raymond E. Clutts, P.C. c/o Provena Saint Joseph Medical 333 N. Madison Joliet, IL 60435		н	Medical		D			188,991.77
Account No.			Raymond E. Clutts, P.C.	\top	T	T	T	
Representing: Raymond E. Clutts, P.C.			1111 Plaza Drive, Suite 405 Schaumburg, IL 60173					
Account No.			Medical	T	T	T	T	
Roland Borrasi/Silver Cross Hospita Integrated Health Center 333 N. Hammes Avenue Joliet, IL 60435		н						Unknown
Account No. #554076 & #651468			Medical	T	T	T	T	
RS Medical 14001 S.E. First Street Vancouver, WA 98684		н						1,073.13
Account No.	T		Medical	T	\vdash	t	+	
Seema Gupta MD 1220 Hobson Road, Suite 232 Naperville, IL 60540		н						154.30
Sheet no. 9 of 11 sheets attached to Schedule of				Subt	tota	al	†	4
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	paş	ge)	,	190,219.20

Case 09-06288 Doc 1 Filed 02/26/09 Entered 02/26/09 15:42:11 Desc Main Page 30 of 56 Document

B6F (Official Form 6F) (12/07) - Cont.

In re	Anthony A. Bonuchi,	Case No.
	Laura N. Bonuchi	

		_					_	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) Account No. 10913540	CODEBTOR	H W J	CONSIDERATION FOR CLAIM. IF CLAIM	COZH-ZGEZH	NLLQULDAH	U T F		AMOUNT OF CLAIM
Shelia Rao D.O. ICS Collections Service P.O. Box 1010 Tinley Park, IL 60477-9110		н			ED		_	0.00
Account No. F024395246 \$ F025076969 Silver Cross 1200 Maple Road Joliet, IL 60432		Н	F022752109 & F024795577 \$ F022572192 Medical					190.20
Account No. 11090 Suburban Pain Care America, S.C. 18237 South Kedzie Homewood, IL 60430		н	Medical					3,619.50
Account No. unknown Sue Szumigalski, Psy. D. LCPC 1030 S. LaGrange Road, Suite 8 La Grange, IL 60525		w	Medical					92.90
Account No. 030612BU014 Toyota Finance Services P.O. Box 4102 Carol Stream, IL 60197-4102		н	deficiency of 2006 Toyota Tundra					652.00
Sheet no. _10 of _11 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of t	Subt			Ţ	4,554.60

Case 09-06288 Doc 1 Filed 02/26/09 Entered 02/26/09 15:42:11 Desc Main Page 31 of 56 Document

 $B6F\ (Official\ Form\ 6F)\ (12/07)$ - Cont.

In re	Anthony A. Bonuchi,	Case No
	Laura N. Bonuchi	

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CREDITOR'S NAME,	ŏ		sband, Wife, Joint, or Community	١ŏ	N	Į	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J H H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	L QU L DA	DISPUTED	AMOUNT OF CLAIM
Account No.			Medical prescriptions	1 ï	Ť		
Walgreens 16750 W 159th Street Lockport, IL 60441		н			D		137.99
Account No.		┢	Medical Prescriptions	╁			
Walmart MCCBG P.O. Box 103044 Roswell, GA 30076		н					
							5.00
Account No.							
Account No.							
Account No.							
Sheet no11_ of _11_ sheets attached to Schedule of			2	Subt	tota	.1	142.99
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	142.99
			(Report on Summary of So		ota lule		543,147.53

Case 09-06288 Doc 1 Filed 02/26/09 Entered 02/26/09 15:42:11 Desc Main Document Page 32 of 56

B6G (Official Form 6G) (12/07)

In re Anthony A. Bonuchi, Case No. _____

Debtors

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

Block Klukas & Manzella, P,C, 19 West Jefferson Street Joliet, IL 60432

Direct TV satellite service (month to month)-assume

JUNE, PRODEHL & RENZI, LLC 1861 Black Road Joliet, IL 60435

tenured teacher contract (year to year)-assume

representation Chapter 7 Bankruptcy-assume

Workers compensation-assume (Debtor)

PCCSD202

(Co-Debtor)

Case 09-06288 Doc 1 Filed 02/26/09 Entered 02/26/09 15:42:11 Desc Main Document Page 33 of 56

B6H (Official Form 6H) (12/07)

In re	Anthony A. Bonuchi,	Case No.
	Laura N. Ronuchi	

Debtors

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

B6I (Official Form 6I) (12/07)

	Anthony A. Bonuchi			
In re	Laura N. Bonuchi		Case No.	
		Debtor(s)	·	

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status: DEPENDENTS OF DEBTOR AND SPOUSE					
	RELATIONSHIP(S):	AGE(AGE(S):		
Married	Daughter	:	2.5		
Employment:	DEBTOR		SPOUSE		
Occupation		education	teacher		
Name of Employer	Work compensation/disputed	Plainfield S	School District #2	02	
How long employed		6 years			
Address of Employer	N/A	Plainfield,	IL 60436		
INCOME: (Estimate of average or	projected monthly income at time case filed)	1	DEBTOR		SPOUSE
	I commissions (Prorate if not paid monthly)	9		\$	3,483.59
2. Estimate monthly overtime		\$	0.00	\$	0.00
3. SUBTOTAL		S	0.00	\$_	3,483.59
4. LESS PAYROLL DEDUCTION	S				
 a. Payroll taxes and social sec 	urity	9		\$ _	523.66
b. Insurance		\$	0.00	\$ _	203.78
c. Union dues	_	\$	0.00	\$_	82.20
d. Other (Specify): pen	sion		0.00	\$_	394.59
			0.00	\$_	0.00
5. SUBTOTAL OF PAYROLL DE	DUCTIONS	9	0.00	\$_	1,204.23
6. TOTAL NET MONTHLY TAKE	E HOME PAY	9	0.00	\$_	2,279.36
7. Regular income from operation of	of business or profession or farm (Attach detailed	statement)	0.00	\$	0.00
8. Income from real property	`	· .	0.00	\$	0.00
9. Interest and dividends		9	0.00	\$	0.00
	ort payments payable to the debtor for the debtor's	s use or that of		Φ.	0.00
dependents listed above	agistanaa	3	0.00	\$ _	0.00
11. Social security or government a (Specify):	ssistance		0.00	\$	0.00
(Specify).			0.00	\$ -	0.00
12. Pension or retirement income			0.00	\$ -	0.00
13. Other monthly income		4		Ψ_	0.00
(Specify):		9	0.00	\$	0.00
			0.00	\$	0.00
14. SUBTOTAL OF LINES 7 THR	OUGH 13	9	0.00	\$_	0.00
15. AVERAGE MONTHLY INCO	ME (Add amounts shown on lines 6 and 14)	9	0.00	\$_	2,279.36
	ITHLY INCOME: (Combine column totals from	line 15)	\$	2,279	9.36

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

2/26/09 3:39PM

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

Note: Debtor litigating injuries that occurred on job with resolution of case possible within next 6 months. Possible
T.T.D. payments will also resume.

Case 09-06288 Doc 1 Filed 02/26/09 Entered 02/26/09 15:42:11 Desc Main

B6J (Official Form 6J) (12/07)

Document Page 35 of 56

2/26/09 3:39PM

_	Anthony A. Bonuchi			
In re	Laura N. Bonuchi		Case No.	
		Debtor(s)	_	

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22	2C.	
\square Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete expenditures labeled "Spouse."	ete a separat	e schedule of
1. Rent or home mortgage payment (include lot rented for mobile home)	\$	2,392.91
a. Are real estate taxes included? Yes X No		
b. Is property insurance included? Yes No _X_		
2. Utilities: a. Electricity and heating fuel	\$	135.00
b. Water and sewer	\$	60.00
c. Telephone	\$	70.00
d. Other See Detailed Expense Attachment	\$	170.00
3. Home maintenance (repairs and upkeep)	\$	45.00
4. Food	\$	500.00
5. Clothing	\$	50.00
6. Laundry and dry cleaning	\$	25.00
7. Medical and dental expenses	\$	60.00
8. Transportation (not including car payments)	\$	200.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	45.00
10. Charitable contributions	\$	0.00
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	0.00
b. Life	\$	0.00
c. Health	\$	0.00
d. Auto	\$	225.00
e. Other Property Insurance	\$	80.00
12. Taxes (not deducted from wages or included in home mortgage payments)		
(Specify)	\$	0.00
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)		
a. Auto	\$	476.07
b. Other See Detailed Expense Attachment	\$	305.00
14. Alimony, maintenance, and support paid to others	\$	0.00
15. Payments for support of additional dependents not living at your home	\$	0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	0.00
17. Other See Detailed Expense Attachment	\$	175.00
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$	5,013.98
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:	_	
20. STATEMENT OF MONTHLY NET INCOME		
a. Average monthly income from Line 15 of Schedule I	\$	2,279.36
b. Average monthly expenses from Line 18 above	\$	5,013.98
c. Monthly net income (a. minus b.)	\$	-2,734.62

Doc 1 Filed 02/26/09 Entered 02/26/09 15:42:11 Desc Main Case 09-06288

B6J (Official Form 6J) (12/07)

Student loans

Total Other Installment Payments

Total Other Expenditures

Anthony A. Bonuchi In re Laura N. Bonuchi

Page 36 of 56 Document

Case No.

\$

\$

2/26/09 3:39PM

120.00

305.00

175.00

Debtor(s)

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S) **Detailed Expense Attachment**

Other Utility Expenditures:		
gas	<u> </u>	105.00
cable	\$	65.00
Total Other Utility Expenditures	\$	170.00
Other Installment Payments:		
prescriptions	\$	25.00
Child Care and Day Care	\$	160.00

\$ 55.00
\$ 35.00
\$ 85.00
\$ _ \$ _ \$ _

Case 09-06288 Doc 1 Filed 02/26/09 Entered 02/26/09 15:42:11 Desc Main

B6 Declaration (Official Form 6 - Declaration). (12/07)

Document

Page 37 of 56

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United States Bankruptcy Court Northern District of Illinois

In re	Anthony A. Bonuchi Laura N. Bonuchi		Case No.	
		Debtor(s)	Chapter	7
			•	

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

			ad the foregoing summary and schedules, consisting of est of my knowledge, information, and belief.
Date	February 26, 2009	Signature	/s/ Anthony A. Bonuchi Anthony A. Bonuchi Debtor
Date	February 26, 2009	Signature	/s/ Laura N. Bonuchi Laura N. Bonuchi Joint Debtor

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Case 09-06288 Doc 1 Filed 02/26/09 Entered 02/26/09 15:42:11 Desc Main Document Page 38 of 56

B7 (Official Form 7) (12/07)

United States Bankruptcy Court Northern District of Illinois

In re	Anthony A. Bonuchi Laura N. Bonuchi		Case No.	
		Debtor(s)	Chapter	7
			-	

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE **\$34,885.00 2007 \$42,979.17 2008**

2/26/09 3:39PM

2

2/26/09 3:39PM

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

2007 (est) temp disability benefits (unknown) \$0.00

\$19,800.00 2008 disability benefits (est)

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts. List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS DATES OF AMOUNT STILL OF CREDITOR **PAYMENTS** AMOUNT PAID **OWING** scheduled creditors and ordinary ongoing \$0.00 \$0.00 course of personal affairs

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

		AMOUNT	
	DATES OF	PAID OR	
	PAYMENTS/	VALUE OF	AMOUNT STILL
NAME AND ADDRESS OF CREDITOR	TRANSFERS	TRANSFERS	OWING

None

c. All debtors: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND AMOUNT STILL AMOUNT PAID RELATIONSHIP TO DEBTOR DATE OF PAYMENT OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

CADTION OF CHIT

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AND CASE NUMBER Bonuchi vs. Lockport Fire and Ambulance District	NATURE OF PROCEEDING workmans compensation	AND LOCATION Will County	DISPOSITION pending
Chase Bank v Bonuchi - 09 AR 0144	Collection	Will County	pending
Indy Mac v Bonuchi et al	foreclosure	Will County	Pending

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Document Page 40 of 56

2/26/09 3:39PM

3

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER **Toyota Finance**

DATE OF REPOSSESSION. FORECLOSURE SALE. TRANSFER OR RETURN

DESCRIPTION AND VALUE OF **PROPERTY**

12/08 repossessed 06 Tundra (pending sale)

Indy Mac see #4, supra pending

residence - FMV: \$225,000.00

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF

NAME AND ADDRESS OF ASSIGNEE **Medical Care Providers**

ASSIGNMENT ongoing

TERMS OF ASSIGNMENT OR SETTLEMENT

assigned insurance benfits

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN Toyota Finance

NAME AND LOCATION OF COURT CASE TITLE & NUMBER Will County

DATE OF ORDER pending

DESCRIPTION AND VALUE OF

PROPERTY sale of collateral (date

unknown)

7. Gifts

None

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

2/26/09 3:39PM

4

8. Losses

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None П

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within one year immediately preceding the commencement of this case.

DATE OF PAYMENT. AMOUNT OF MONEY NAME AND ADDRESS NAME OF PAYOR IF OTHER OR DESCRIPTION AND VALUE OF PAYEE THAN DEBTOR OF PROPERTY 12/8/08 JUNE, PRODEHL & RENZI, LLC Consultation \$0.00 1861 Black Road Joliet, IL 60435 JUNE, PRODEHL & RENZI, LLC 1/20/2009 **Bankruptcy representation** 1861 Black Road Chapter 7 \$900.00 + costs Joliet, IL 60435

In Charge 1/21/09 Credit Counseling \$35.00

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, DESCRIBE PROPERTY TRANSFERRED DATE RELATIONSHIP TO DEBTOR AND VALUE RECEIVED 6/08 2006 Honda sold motorcycle via Bill of Sale fmv. \$4.600

(pending transfer of title) to third party (used to paid bills with \$2,800 to Earth Mover Credit Union)

None b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER AMOUNT OF MONEY OR DESCRIPTION AND DATE(S) OF **DEVICE** VALUE OF PROPERTY OR DEBTOR'S INTEREST TRANSFER(S) IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

> TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

NAME AND ADDRESS OF INSTITUTION

Document

Page 42 of 56

2/26/09 3:39PM

5

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None П

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

Medical Care Providers

ongoing

Applied insurance benefits to reduce balance owed

Toyota Finance ongoing

applied proceeds of sale to reduce balance owed

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER **Minor Child**

DESCRIPTION AND VALUE OF **PROPERTY** savings bonds

LOCATION OF PROPERTY est value \$110.00 (with

Debtors)

15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

Document

Page 43 of 56

2/26/09 3:39PM

6

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF DATE OF **ENVIRONMENTAL**

SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous None

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF **ENVIRONMENTAL**

SITE NAME AND ADDRESS **GOVERNMENTAL UNIT** NOTICE I.AW

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six **years** immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO.

BEGINNING AND (ITIN)/ COMPLETE EIN ADDRESS NATURE OF BUSINESS **ENDING DATES**

None

NAME

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME **ADDRESS**

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

Document Page 44 of 56

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

2/26/09 3:39PM

7

None b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

DATES SERVICES RENDERED NAME **ADDRESS**

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

ADDRESS NAME

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within two years immediately preceding the commencement of this case.

NAME AND ADDRESS **DATE ISSUED**

INVENTORY SUPERVISOR

20. Inventories

None a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

None

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY

DATE OF INVENTORY

DATE OF INVENTORY

21. Current Partners, Officers, Directors and Shareholders

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

Best Case Bankruptcy

b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, None controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME **ADDRESS** DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS TITLE DATE OF TERMINATION

TITLE

Case 09-06288 Doc 1 Filed 02/26/09 Entered 02/26/09 15:42:11 Desc Main

Document Page 45 of 56

23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

2/26/09 3:39PM

8

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within six years immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within six years immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	February 26, 2009	Signature	/s/ Anthony A. Bonuchi	
			Anthony A. Bonuchi	
			Debtor	
Date	February 26, 2009	Signature	/s/ Laura N. Bonuchi	
			Laura N. Bonuchi	
			Ioint Debtor	

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

Case 09-06288 Doc 1 Filed 02/26/09 Entered 02/26/09 15:42:11 Desc Main

Document

Page 46 of 56

Form 8 (10/05)

United States Bankruptcy Court Northern District of Illinois

In re	Anthony A. Bonuchi Laura N. Bonuchi			Case N	0.	
			Debtor(s)	Chapter	7	
	CHAPTER 7 INDI	VIDUAL DEBT	OR'S STATEM	ENT OF IN	TENTION	
■ I	have filed a schedule of assets and liabil	ities which includes deb	ets secured by property	of the estate.		
] I	have filed a schedule of executory contra	acts and unexpired lease	es which includes perso	onal property su	bject to an unexpir	ed lease.
■ I	intend to do the following with respect to	o property of the estate	which secures those de	ebts or is subject	to a lease:	
December	Sing of Council Description	Conditional Nation	Property will b		Property will be redeemed pursuant to	Debt will be reaffirmed pursuant to
	tion of Secured Property Movers Credit Union	Creditor's Name Earth Mover Credit	Surrendered .	as exempt	11 U.S.C. § 722	11 U.S.C. § 524(c)
	gs)(p.l.)(Debtor) (multiple	Union				^
	londa CRF250 R (with 3rd (f.l.) (Multiple collateral)	Earth Mover Credit Union				Х
	/amaha Y2450 with Debtor(f.l.) ple collateral)	Earth Mover Credit Union				Х
	family residence located at 520 S. son Street, Lockport, IL 60441	Indy Mac				Х
2006 J	letta (f.l)	VW Finance	Debtor will	reaffirm for fa	ir market value	•
Descript	tion of Leased		Lease will be assumed pursu to 11 U.S.C. §	ant		
Property		Lessor's Name	362(h)(1)(A)			
-NONE	!-					
Date _	February 26, 2009	Signature	/s/ Anthony A. Bo Anthony A. Bonud Debtor			
Date _	February 26, 2009	Signature	/s/ Laura N. Bonu Laura N. Bonuchi			

Case 09-06288 Doc 1 Filed 02/26/09 Entered 02/26/09 15:42:11 Desc Main Document Page 47 of 56
United States Bankruptcy Court
Northern District of Illinois

In re	Anthony A. Bonuchi Laura N. Bonuchi		Case No.	
		Debtor(s)	Chapter	7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S) 1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debto compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services ren be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept. \$ 900.00 Prior to the filing of this statement I have received. \$ 525.00 Balance Due. \$ 375.00 S 325.00 of the filing fee has been paid. 3. The source of the compensation paid to me was: Debtor Other (specify): 4. The source of compensation to be paid to me is: Debtor Other (specify): I have agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankrup b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Representation consists of statutorily required review, exemption planning and drafting and review sche and with any additional services billed at an hourly rate per the executed retainer agreement. Post filling services are to be paid hourly post-filling for such services rendered and amount due is estimation of fee	
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	chedules ng legal
 By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions plus post-filing motions and amendments excluded. 	ts are
CERTIFICATION	
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debte this bankruptcy proceeding. Representation consists of statutorily required review of income, including CMI preparation, exemption plan drafting and review of pleadings & schedules. Unless fee is prepaid, all post-filing services are estimated pursuant to amount set forth her all fees to be billed at an hourly rate of \$250.00 for legal services provided.	olanning,
Dated: February 26, 2009 /s/ John C. Renzi -	
John C. Renzi - #03124627 JUNE, PRODEHL & RENZI - #03124627	
1861 Black Road	
Joliet, IL 60435 (815) 725-8000 Fax: (815)725-6126	

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

- 1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.
- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.
- 3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Case 09-06288 Doc 1 Filed 02/26/09 Entered 02/26/09 15:42:11 Desc Main Document Page 49 of 56

B 201 (04/09/06)

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

Certificate of Attorney

I hereby certify that I delivered to the debtor this notice required by \S 342(b) of the Bankruptcy Code.

John C. Renzi - #03124627	X /s/ John C. Renzi -	February 26, 2009
Printed Name of Attorney	Signature of Attorney	Date
Address:		
1861 Black Road		
Joliet, IL 60435		
(815) 725-8000		
	Certificate of Debtor	
I (We), the debtor(s), affirm that I (we) have	re received and read this notice.	
Anthony A. Bonuchi		
Laura N. Bonuchi	X /s/ Anthony A. Bonuchi	February 26, 2009
Printed Name of Debtor	Signature of Debtor	Date
Case No. (if known)	X /s/ Laura N. Bonuchi	February 26, 2009
	Signature of Joint Debtor (if any)	Date

2/26/09 3:39PM

United States Bankruptcy Court Northern District of Illinois

In re	Anthony A. Bonuchi Laura N. Bonuchi		Case No.	
		Debtor(s)	Chapter	7
	VE	RIFICATION OF CREDITOR MA	ATRIX	
		Number of C	Creditors:	60
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credito	rs is true and	correct to the best of my
Date:	February 26, 2009	/s/ Anthony A. Bonuchi Anthony A. Bonuchi		
Date:	February 26, 2009	Signature of Debtor /s/ Laura N. Bonuchi		
Date: Date:		Anthony A. Bonuchi Signature of Debtor		

Signature of Debtor

Allied Anesthesia Associates 185 Penny Avenue Dundee, IL 60118

Associated Anesthesiologists 301 N. Madison St. #306 Joliet, IL 60435

Associated Radiologists of Joliet 1200 Maple Road Suite 3309 Joliet, IL 60432

Athletic & Therapeuric Institute P.O. Box 95139 Palatine, IL 60095-0139

ATI Physical Therapy 806 Laraway Road New Lenox, IL 60451

Back in Balance 355 N. La Grange Road La Grange Park, IL 60526-5622

Bank of America P.O. Box 15019 Wilmington, DE 19886-5019

Blatt, Hasenmiller, Leibseker & Moo 125 S. Wacker Dr. Ste. 400 Chicago, IL 60606

Blue Cross Blue Shield 2329 S. MacArthur Blvd Springfield, IL 62704-4503

Capital One Bank P.O. Box 6492 Carol Stream, IL 60197-6492

Chase Card Member Services P.O. Box 15153 Wilmington, DE 19886-5153

Citi Bank P.O. Box 6000 The Lakes, NV 89163

Citi Cards P.O. Box 6000 The Lakes, NV 89163

Codilis & Assoc., P.C. 15 W. 030 North Frontage Rd. Ste. 100 Burr Ridge, IL 60527

Community Chiropractic Center 101 Hempstead Place Joliet, IL 60433

Discover P.O. Box 6103 Carol Stream, IL 60197-6492

Dr. George E. Dephillips 2000 Glenwood Avenue Joliet, IL 60435

Dr. Michael H. Malek 555 West Court Street, Suite 412 Kankakee, IL 60901

DuPage Emergency Physical Care Center P.O. Box 88667 Chicago, IL 60680-1667

Earth Mover Credit Union P.O. Box 2937 Aurora, IL 60507

Earth Mover Credit Union

Edward Health Ventures Linden Oaks Medical Group 801 S. Washington Street Naperville, IL 60540 Edward Hospital 3471 Eagle Way Carol Stream, IL 60197-4102

EM Strategies Armor Systems Corporation 1700 Kiefer Drive, Suite 1 Zion, IL 60099-5105

ENT Surgical Consultants 2201 Glenwood Avenue Joliet, IL 60435

ER Physicians c/o Medical Managment Services 4100 Embassy Drive, Suite 200 Grand Rapids, MI 49546

Future Diagnostics Group 254 Republic Avenue Joliet, IL 60435

GM Card P.O. Box 37281 Baltimore, MD 21297-3281

Hinsdale Hospital 835 Treasury Center Chicago, IL 60694-3800

HSBC Bank 5300 S. 6th Street Springfield, IL 62703-5184

Industrial Pharmacy Management 20377 SW Acacia Street Newport Beach, CA 92660

Indy Mac P.O. Box 78826 Phoenix, AZ 85062-8826

Joliet Radiological Service Corp. 333 Madison Street Joliet, IL 60435

Laboratory & Pathology Diagnostocs Department 4387 Carol Stream, IL 60122-4387

Loyola University Medical Center 16621 107th Street Orland Park, IL 60467

Loyola University Physician Two Westbrook Corporate Center Suite 600 Westchester, IL 60154

Michael D. Fine 131 South Dearborn Street, Floor 5 Chicago, IL 60603

Midwest Sports & Pain 1280 Wingham Pkwy Romeoville, IL 60446

National Education 200 W. Monroe Street Suite 700 Chicago, IL 60606-5075

Orthofix 273 Azalea Road Mobile, AL 36609

Pain & Spine Institute 2400 Glenwood Avenue, Suite 210 Joliet, IL 60435

Pain Centers of Chicago, LLC 301 Madison Street, room 305 Joliet, IL 60435

Pathology Consultants c/o McKesson, PIA 393 Lawyer Reques 4400 Garfield Road Clinton Township, MI 48038 Plainfield Medical Center Dr. Mohin T. Samaraweera, M.D. 24016 W. Main Street Plainfield, IL 60586

Prairie Emergency Physicians P.O. Box 189015 Fort Lauderdale, FL 33318-9015

Provena Health 2870 Stoner Court, Suite 300 North Liberty, IA 52317

Provena St. Joseph's Medical Center 333 N. Madison Joliet, IL 60435

Raymond E. Clutts, P.C. c/o Provena Saint Joseph Medical 333 N. Madison Joliet, IL 60435

Raymond E. Clutts, P.C. 1111 Plaza Drive, Suite 405 Schaumburg, IL 60173

Roland Borrasi/Silver Cross Hospita Integrated Health Center 333 N. Hammes Avenue Joliet, IL 60435

RS Medical 14001 S.E. First Street Vancouver, WA 98684

Seema Gupta MD 1220 Hobson Road, Suite 232 Naperville, IL 60540

Shelia Rao D.O. ICS Collections Service P.O. Box 1010 Tinley Park, IL 60477-9110 Silver Cross 1200 Maple Road Joliet, IL 60432

Suburban Pain Care America, S.C. 18237 South Kedzie Homewood, IL 60430

Sue Szumigalski, Psy. D. LCPC 1030 S. LaGrange Road, Suite 8 La Grange, IL 60525

Toyota Finance Services P.O. Box 4102 Carol Stream, IL 60197-4102

VW Finance P.O. Box 17497 Baltimore, MD 21297-1497

Walgreens 16750 W 159th Street Lockport, IL 60441

Walmart MCCBG P.O. Box 103044 Roswell, GA 30076